

# Late Contribution Report

Type or print in ink.  
Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

<b>NAME OF FILER</b> Los Angeles County Democratic Party - State Candidate Committee			<b>Date of This Filing</b> <u>11/01/2018</u>	Date Stamp       Page 1 of 2	<div style="background-color: black; color: white; padding: 5px; font-weight: bold; font-size: 1.2em;">                     CALIFORNIA FORM 497                 </div> For Official Use Only
<b>AREA CODE/PHONE NUMBER</b> (213)452-6565	<b>I.D. NUMBER</b> (if applicable) 1237135	<b>Report No.</b> <u>110118</u>			
<b>STREET ADDRESS</b>  					
<b>CITY</b> Los Angeles	<b>STATE</b> CA	<b>ZIP CODE</b> 90017			
			<input type="checkbox"/> <b>Amendment to Report No.</b> _____ (explain below)		
			<b>No. of Pages</b> <u>2</u>		

## Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
10/31/2018	I Love LA Long Beach, CA 90802-8832  ID# 1400250	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00
10/31/2018	Service Employees International Union Local 121RN Health Care Fund Sacramento, CA 95814-4602  ID# 1385421	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$5,000.00
10/31/2018	Taj for City Council 2018 Artesia, CA 90701-5858  ID# 1358275	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00

### \*Contributor Codes

IND - Individual	PTY - Political Party
COM - Recipient Committee (other than PTY or SCC)	SCC - Small Contributor Committee
OTH - Other	

Reason for Amendment:

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<b>AREA CODE/PHONE NUMBER</b> (213)452-6565	<b>I.D. NUMBER</b> (if applicable) 1237135	<b>Report No.</b> 110118			
<b>STREET ADDRESS</b>		<input type="checkbox"/> <b>Amendment to Report No.</b> _____ (explain below)			
<b>CITY</b> Los Angeles	<b>STATE</b> CA	<b>ZIP CODE</b> 90017	<b>No. of Pages</b> 2		

## Late Contribution(s) Made

DATE MADE	FULL NAME, MAILING ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION	AMOUNT OF CONTRIBUTION	DATE OF ELECTION (IF APPLICABLE)
10/31/2018	Christy Smith For Assembly 2018 Covina, CA 91722-3222  ID# 1395167	Christy Smith State Assembly District 38 Jurisdiction: State Assembly District	\$30,000.00	11/06/2018
10/31/2018	Rudy Salas for Assembly 2018 Bakersfield, CA 93304-4018  ID# 1393439	Rudy Salas State Assembly District 32 Jurisdiction: State Assembly District	\$50,000.00	11/06/2018

Reason for Amendment: